



Program Permission Form, Emergency Information and Media Release

Please print clearly.

Student's Name

Home Address

Town, State, Zip

Parent/Legal Guardian 1 Name

Primary Phone

Parent/Legal Guardian 2 Name

Primary Phone

Primary Care Provider/Doctor

Office Phone

Insurance Provider

Policy Number

Subscriber's Name

Relationship

Current School

Age

Grade

In case of an emergency, staff will make every attempt to contact the above parents/legal guardians. In case they cannot be reached, please provide two additional emergency contacts.

Emergency Contact 1

Phone

Emergency Contact 2

Phone

Medical/Behavior Concerns/Allergies

staff must be provided current labeled rescue/emergency medications on the day of the program (Epi-Pens, rescue inhalers, anti-seizure medications, etc.). Copies of behavior plans are also encouraged.

Photo/Video/Media Release:

By signing below, I, as parent or legal guardian of a minor, give my permission for my child to be photographed and/or filmed during program time, and I allow my child to be identified by first name. By signing below, I hereby acknowledge that photos and/or videos may be printed or published in print, electronic or social media. **If you do not want your child to be photographed, do not sign below.**

Parent/Legal Guardian Permission for Photo/Video/Media Release

Town of North Reading Youth Services Programs, Consent, Release of Claims, Indemnity and Hold Harmless Agreement

I, the undersigned, _____ (insert your name or name of parent/legal guardian, if minor participant), as parent/legal guardian of _____ (insert name if minor is participating in the program) do consent to _____'s (participant's name) participation in Town of North Reading Youth Services programs.

I also agree to forever release the Town of North Reading and the North Reading Youth Services Department and their employees, officials, agents, board members, volunteers and any and all individuals assisting with youth services programs (the "Releasees") from any and all claims, right of action, causes of action, damages, costs, compensation and attorneys' fees, that may have arisen in the past, or may arise in the future, directly or indirectly, from damages or personal injuries to _____ (name of participant), resulting from _____'s (name of participant) participation in any Town of North Reading Youth Services Program.

I, on my own behalf and/ or on behalf of the minor participant, also give permission for _____ (name of participant) to be transported by a licensed driver for purposes of Youth Services programs. By signing below, I hereby acknowledge that transportation may occur via a town vehicle, rented vehicle, leased or personal vehicle. I further understand the Youth Services Director may drive children to programming related to Youth Services Programs and as necessary in emergencies. I hereby forever release the Releasees, as well as any other drivers, owners and/or leasees of the vehicles from any and all claims or causes of action, and agree that the Releasees are not responsible for any personal injury or property damage that may occur during said transportation.

High School Students Only: I hereby acknowledge that the Releasees are not responsible for any damage or personal injury to any participants who decide to be transported with other student participants to any Youth Services Programs, which is their sole decision and/or decision of their parent/legal guardian. By signing below, I hereby agree to forever release and hold harmless the Releasees from any and all claims, right of action, causes of action, damages, costs, compensation and attorneys' fees, that may have arisen in the past, or may arise in the future, directly or indirectly, from damages or personal injuries that result from the participants' voluntary decision to be transported by non-employees to any Youth Services Programs.

I also promise to indemnify, defend and hold harmless the Releasees on behalf of myself and/or minor participant against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries or damage to any Town owned property resulting from participation in any Youth Services Programs. I also promise to fully reimburse the Town for any property loss or damage as a result of participation in said programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that participation in a Town of North Reading Youth Services Program is entirely voluntary and that I am free to choose not to participate in said program or have a minor participate in said program. By signing this form, I authorize participation in the Town of North Reading Youth Services Programs with full knowledge that the Releasees will not be liable for any damage or injuries resulting from my participation in these programs.

Signature: _____

Parent or Guardian Signature (if minor): _____
(Parent / Legal Guardian – please circle one)

Date: _____

Print name: _____